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10.28.05

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09/533,798		FILING DATE		
							APPLICANT(S)				
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			"		"	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1							51				
2		1					52			1	
3							53			1	
4	1						54				
5							55				
6							56				
7							57				
8							58				
9	1		1				59				
10							60				
11		1		1			61				
12	1		1				62				
13							63				
14		1		1			64				
15							65				
16		1		1			66				
17							67				
18		1					68				
19		1					69				
20		1					70				
21		1					71				
22	1						72				
23							73				
24	1						74				
25		1					75				
26	1						76				
27							77				
28		1					78				
29		1					79				
30		1					80				
31		1					81				
32		1					82				
33		1					83				
34		1					84				
35							85				
36							86				
37							87				
38							88				
39							89				
40							90				
41		1					91				
42	1						92				
43		1					93				
44	1						94				
45							95				
46				1			96				
47				1			97				
48				1			98				
49				1			99				
50							100				
TOTAL IND.	12						TOTAL IND.		2		
TOTAL DEP.	24						TOTAL DEP.		12		
TOTAL CLAIMS	36						TOTAL CLAIMS		14		

PTO-1260 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE
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